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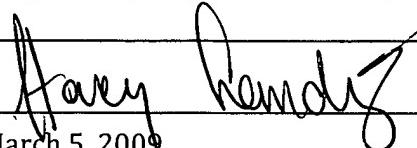
TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/536,888
		Filing Date	May 31, 2005
		First Named Inventor	Thomas R. Young
		Group Art Unit	1638
		Examiner Name	Russell P. Kallis
Total Number of Pages in This Submission	14	Attorney Docket Number	63-000210US

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> PTO-1449 Form	<input type="checkbox"/> Interview Summary
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Cited References	<input type="checkbox"/> Request for Continued Examination (RCE)
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Copy of PCT Search Report	<input type="checkbox"/> Request for Corrected Filing receipt
<input type="checkbox"/> <input checked="" type="checkbox"/> Amendment after Final Office Action	<input type="checkbox"/> Copy of EP Search Report	<input checked="" type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> CD, Number of CD(s) _____	<input checked="" type="checkbox"/> Appendix A: Figure of Pineapple
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Receipt Acknowledgement Postcard	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Authorization to Charge Deposit Account Please charge Deposit Account No. 50-0893 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Stacy Landry, Reg. No. 42,779, Quine Intellectual Property Law Group, P.C.	
Signature		
Date	March 5, 2009	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Deborah Barragan		
Signature		Date	March 5, 2009